



**Bill Anoatubby**  
Governor

**the**  
**Chickasaw Nation**  
**Division of Administrative Services**  
**Tribal Governmental Services**

520 E. Arlington / P.O. Box 1548 / Ada, OK 74821 / Phone: (580) 436-2603 / Fax: (580) 436-7226 / e-mail: cdib@chickasaw.net

**Application for Replacement of**

(Check appropriate box)

- ☐ **Chickasaw Citizenship Card**  
☐ **CDIB Card**

I am requesting another card(s), as my card(s) was/were \_\_\_\_\_

\_\_\_\_\_  
(Please indicate what happened to your card(s))

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Tribe(s): \_\_\_\_\_ Degree of Blood: \_\_\_\_\_

Address: \_\_\_\_\_  
Mailing Address (Street, Box, Route) City State Zip Code

Phone No.: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

\_\_\_\_\_  
Name of applicant or parent/legal guardian (print)

\_\_\_\_\_  
Signature of applicant or parent/legal guardian

\_\_\_\_\_  
Date

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The application for replacement of a card(s) must be filled out and signed by applicant or applicant's parent/legal guardian and returned to the Chickasaw Nation Headquarters, Tribal Governmental Services, P.O. Box 1548, Ada, OK 74820.